

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB APPROVAL OMB Number: Expires: April 30,2008 Estimated average burden hours per response.

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix		Serial						
DA	TE RECEIV	ED						

Type of Filing:	
A. BASIC IDENTIFICATION DATA	NOV 19 2007
1. Enter the information requested about the issuer	THOMSON
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Centroparts Incorporated	FINANCIAL
Address of Executive Offices (Number and Street, City, State, Zip Code) 433 California Street, Suite 810, San Francisco, CA 94104	Telephone Number (Including Area Code) (415) 788-8811
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same	Telephone Number (Including Area Code)
Brief Description of Business Distributor of auto parts	
	ease specify)
	07083557

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information r	equested for the fo	llowing:						,	
• Bach promoter of	the issuer, if the is	suer has been organi	ized within	the past five years;		•			••
 Each beneficial ov 	vner having the pov	ver to vote or dispose	, or direct t	he vote or disposition	n of, 10	% or more	of a clas	ss of equity securities	of the issuer.
	ficer and director of	of corporate issuers a	ınd of corp	orate general and ma	maging	g partners o	of partne	ership issuers; and	
Each general and:	managing partner	of partnership issuers	s.						
Check Box(es) that Apply:	Promoter	Beneficial O	wner 🗸	Executive Officer	Ø	Director		General and/or Managing Partner	
				·					
Full Name (Last name first, Wai Choon (David) Won									
Business or Residence Addre 433 California Street, St			Zip Code)			·· ·- · ·- ·			
Check Box(es) that Apply:	Promoter	Beneficial O	wner 🔽	Executive Officer	Z	Director		General and/or Managing Partner	
Full Name (Last name first,	if individual)								
Chong Luan (Kristine) Fo	00					-			
Business or Residence Addre 433 California Street, Suit	•	Street, City, State, 2 94104	Zip Code)	-					
Check Box(es) that Apply:	Promoter	Beneficial Ov	wner 📋	Executive Officer	Z)	Director		General and/or Managing Partner	
Full Name (Last name first, Jason Lee	if individual)							-	
Business or Residence Addre			Zip Code)						
433 California Street, Sui	te 810, SF, CA 9	94104							
Check Box(es) that Apply:	Promoter	Beneficial Ov	vner 🗌	Executive Officer		Director		General and/or Managing Partner	· ,
Full Name (Last name first, i	f individual)								<u>.</u>
Business or Residence Addre	ss (Number and	Street, City, State, 2	Lip Code)				• ,		
Check Box(es) that Apply:	Promoter	Beneficial Ov	vner 📗	Executive Officer		Director	. 🗆	General and/or Managing Partner	
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street, City, State, 2	ip Code)						
Check Box(es) that Apply:	Promoter	Beneficial Ov	vner 🗍	Executive Officer		Director	Ē	General and/or Managing Partner	
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and	Street, City, State, Z	Cip Code)						
Check Box(es) that Apply:	Promoter	Beneficial Ov	vner 🔲	Executive Officer		Director		General and/or Managing Partner	,
Full Name (Last name first, i	f individual)							-	<u>_</u>
Business or Residence Addre	ss (Number and	Street, City, State, Z	ip Code)						
	(Use blan	nk sheet, or copy and	i use additi	ional copies of this s	heet, a	s necessary	<i>(</i>)		

32.7			TENERAL TOTAL		B	NEORMAT	ION ABOU	T OFFER	NG	PEL AL			A STATE
ese-ik.	All Ballings of	part and a thin by	, or other states and the states and									Yes	. No
1.	Has the	issuer sol	d, or does t										
	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?											c 49	. 00.000
2.	2. What is the minimum investment that will be accepted from any individual?										Yes	No	
3.	Does th	ne offering	permit join	t ownersh	ip of a sing	gle unit?	*************	436444444444444			••••••••	E	
4.	Enter ti	he informa	tion reques	ted for eac	h person	who has be	en or will	be paid or	given, dire	ctly or inc	lirectly, any the offering.		
	If a pers	son to be lis s, list the n	sted is an as: ame of the b	sociated pe roker or d	erson or ag ealer. If m	ent of a brol ore than fiv	ker or deale e (5) perso	er registere ns to be list	d with the S ted are asso	SEC and/or	with a state sons of such	;	· ,
			you may s		e iniormai	ion for that	DIOKEI GI	dealer on,	<u>':</u>		<u> </u>	······································	
No	-	Last name	first, if ind	i viduai)	,			•			,		•
Bus	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Cip Code)						
N/A		· .											
Nar	ne of As	sociated B	roker or De	aler				•					
Stat	tes in Wi	nich Person	Listed, Has	Solicited	or Intend	to Solicit	Purchasers						
			s" or check				•	•				☐ Al	l States
	TAT 1	[उन्हों	[A 7]	ופגו	CA	CO	CT	DE	DC	FL	[GA]	HI	Ī
	AL IL	AK IN	AZ IA	AR KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	ŔĬ	SC	SD	IN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	l Name (Last name	first, if indi	ividual)		, .	 	· · · · · · · · · · · · · · · · · · ·					
Bus	iness or	Residence	Address (1	Vumber an	d Street, C	City, State,	Zip Code)						
Nan	ne of As	sociated Br	roker or De	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers			,			
	(Check	"All States	s" or check	individual	States)			*************			***************		States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	ТНΪ	
	TL	IN	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (Last name	first, if indi	vidual)				· · · · · · · · · · · · · · · · · · ·	***		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
~	<u> </u>	Desidence	A -1-1 O	T	d Company C	lie. Ctote '	7in Code						
Bus	iness or	Kesidence	: Address (1	vumber an	a succi, c	.ity, State, A	Cip Code)						•
Nan	ne of Ass	sociated Br	roker or Dea	aler					····				
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
•	(Check	"All States	s" or check	individual	States)	***************************************	**************	***************************************			1	All	States
	AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MÏ	MN	MS	MÖ
	MT	NE	VV	NH	NJ	NM	NY	NC	ND	OH	OK TOTAL	OR DOZ	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

C OFFERING PRICE NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check	¢	
	this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	1	•
•	Type of Security	Aggregate Offering Price	Amount Already Sold
			\$ 0.00
	Debt	400,000,00	
	Equity	\$_100,000.00	<u>\$_100,000.00</u>
	☑ Common ☐ Preferred		0.00
	Convertible Securities (including warrants)	\$ 0.00	
	Partnership Interests		\$ 0.00
	Other (Specify)	\$ 0.00	\$_0.00
	Total	\$ 100,000.00	\$ 100,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	•	
		Number	Aggregate Dollar Amount
		Investors	of Purchases
•	Accredited Investors	2	s 100,000.00
	Non-accredited Investors		\$ 0.00
	Total (for filings under Rule 504 only)		\$ 100,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.	· · · · · · · · · · · · · · · · · · ·	<u> </u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Şold
•	Rule 505		\$ 0.00
	Regulation A		\$ 0.00
	Rule 504	common stk	\$ 100,000.00
	Total		\$_100,000.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$_0.00_
	Printing and Engraving Costs		\$ 200.00
	Legal Fees		\$_2,500.00
	Accounting Fees	_	§ 500.00
	Engineering Fees	_	\$ 0.00
_	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify) State securities exemption notice filing fees	_	\$ 35.00
	Total		s 3,235.00

	C-OFFERING PRICE, NUM	iberior investors, expenses and use of I	ROCEEDS	
t e	nd total expenses furnished in response to Part C -	ring price given in response to Part C — Question 1 - Question 4.a. This difference is the "adjusted gross	logics delicated by the second	\$ 96,765.00
e	ach of the purposes shown. If the amount for a	roceed to the issuer used or proposed to be used for my purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross at C — Question 4.b above.	·	·
			Payments to Officers, Directors, & Affiliates	Payments to Others
				-
_	•	-		— , ·
		[·	- ┌────
P	urchase, rental or leasing and installation of mad	chinery [¢ .	П\$
a	and equipment	cilities	」♥──── ¬ €	
		-		. LJ Ψ
A	equisition of other businesses (including the val fering that may be used in exchange for the asse	tue of securities involved in this		• .
is	sucr pursuant to a merger)	[<u></u>	. 🗆 \$
R	epsyment of indebtedness	· [¬\$. 🗆 \$
	ther (enecify):			ns
				·
_			7 \$	□\$
_	•			
	i	•	-	_
Ţ	otal Payments Listed (column totals added)		∑ \$_ 96	5,765.00
		D REDERALISIONATURE		
ignat	uer has duly caused this notice to be signed by the	undersigned duly authorized person. If this notice mish to the U.S. Securities and Exchange Commis- redited investor pursuant to paragraph (b)(2) of R	is filed under Ru sion, upon writte	le 505, the following
ssuer	(Print or Type)	Signature I	Date	
	pparts Incorporated	Joseph Land	10 3	ro/c
lame	of Signer (Print or Type)	Title of Signer (Print or Type)	-	-
	Luan (Kristine) Foo	Director, Secretary		•
			-	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E STATE SIGNATURE	2	1.45年
· 1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🔀
	See Annendiy Column 5 for state response		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

. /		•
Issuer (Print or Type)	Signature	Date
Centroparts Incorporated	TRICO!	10/30/07
Name (Print or Type)	Title (Print or Type)	
Chong Luan (Kristine) Foo	Director, Secretary	,

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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1	Intend to non-a investor	2 I to sell accredited as in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	. No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK				<u> </u>		,			[·
AZ									
AR									
CA		×	\$100,000	2	\$100,000.00	0	\$0.00		×
со									
СТ				,					
DE									
DC									
FL	·		· 						
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ні									
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LA	·								
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MA									
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·MN									
MS									

		建筑旅道		APP	ENDIX	KATAN ATTORICA KENARTANENKAN	4.4万、福兴		
1	Intend to non-a investors	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		under Sta (if yes, explana	ation of granted)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									<u> </u>
ΜT									
NE									
NV									
NH									
NJ									
· NM									
NY									
NC					-				
ND					110				
ОН				:					
ок			·						
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PA	·	-							
RI ·						·			
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SD				4		·	,		
TN									
TX									
ហ									
VT									
VA							-		
WA									
wv									
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. 1	ř	2 I to sell	Type of security and aggregate offering price		Type of	4 f investor and	·	under St	lification ate ULOE attach ation of
	investor	s in State	offered in state (Part C-Item 1)		amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Non-Accredited Investors Amount Investors Amount				Yes	No
WY									
PR							. = = =		